PUBLIC INFORMATION & COMMUNICATION SERVICES (PICS) NIH - TASK ORDER

RFTOP#152 TITLE: NCI Education Strategic Planning

PART I – REQUEST FOR TASK ORDER (TO) PROPOSALS

A. Point of Contact Name:

Phone- Fax-

Proposal Address: Billing Address:

Accounts Payable, OFM, NIH Bldg 31, Room B1B39

Bethesda, MD 20892-2045

B. PROPOSED PERIOD OF PERFORMANCE: Ten months from the date of task order award.

C. PRICING METHOD: Labor Hour – Estimated Level of Effort is 1500 hours of professional time. The firm shall be compensated only for hours actually worked.

D. PROPOSAL INSTRUCTIONS: Submit an original proposal and 5 hard copies to the POC above. (Also, please submit an electronic copy by e-mail). Proposals should be limited to no more than 10 pages. (Limit does not include resumes, samples of past work, or references.)

E. RESPONSE DUE DATE: September 3, 2003 at 1 pm (EDT)

F. TASK DESCRIPTION:

Background

The Office of Education and Special Initiatives develops, implements, and evaluates education programs across the cancer continuum in support of the NCI. OESI also manages NCI initiatives that address specific challenges in cancer research and treatment. Over the past year, OESI has reaffirmed its mission and core values. In addition, the office has developed clear processes for performing activities central to its mission. In the Fall 2003, the office is starting a reorganization process. Currently, it is divided into 4 branches: Patient and Family Education; Professional Continuing Education; Public and Survivor Education and the Health Promotion Branch. OESI staff also is responsible for Palliative Care Coordination and various clinical trial initiatives across the Institute.

Beginning FY 2005, OESI plans to implement a new office wide strategic planning process. The process is designed to explore trends, current issues and needs in cancer education and policies in order to determine OESI priorities. Using the PRECEDE-PROCEED model as a framework (see attached), the strategic planning process will generate up to 10 priority areas from which OESI program planning will evolve.

Scope of Work and Purpose:

The OESI is seeking contract support and expert consultation to research current trends, issues and needs in cancer education and policies as a part of its strategic planning process.

The contractor shall assign a full-time researcher for a period of at least 10 months, with back up support, who lives and works within a 40 mile radius of Bethesda, MD, and can travel to the NIH on a weekly basis. The researcher, in collaboration with senior OESI staff will:

Specific Tasks:

- 1. Develop outline on accomplishing the tasks below.
- 2. Develop timeline on accomplishing the tasks below.
- 3. Analyze trends on HHS/NIH/NCI priorities related to cancer education NCI wide priorities, including but not limited to:
 - Bypass budget
 - Progress Review Groups
 - NCI divisions and offices (including Division Strategic Plans)
 - CTEP cleared trials (including Cooperative Group Initiatives, Trials)
 - Research and Projects of Cancer Centers, CCOPs, MCCOPs
 - Requests for Applications (RFAs)/ Requests for Proposals (RFPs)/Program Announcements (PAs) including STTR/SBIR
 - Recently Cleared Concepts (by NCI Board of Scientific Advisors) for RFAs and PAs

HHS/NIH Priorities, including but not limited to:

- HP 2010
- HHS top 5 priorities
- Other HHS ICs (i.e. CDC, FDA, NIEHS, AHRQ, HRSA, CMS)
- National Recommendations and Reports (such as IOM, Congressional Budget Office, Health Disparities, etc.)

4. **Analyze trends on cancer morbidity, mortality, and public need,** <u>including but not limited to:</u>

- ACS Cancer Facts and Figures, yearly priority
- SEER
- HINTS
- CIS requests for information
 - 1800-4 CANCER, live help
 - Partnership program
 - Plans for new fact sheets

- 5. Conduct an environmental scan related to cancer-education funded grants, literature, and national programs and synthesize data, including but not limited to:
 - 1. NCI Cancer Research Portfolio/CRISP
 - 2. Literature Review
 - 3. Meeting abstracts of AACR, ASCO, APHA, SOPHE, CDC cancer conference
 - 4. Product Review of other Federal and voluntary organization programs
- 6. **Analyze trends related to national model education programs,** <u>including but not limited to education offices representing other agencies (i.e. USDA, FDA, VA)</u>
- 7. Summarize all data in 30-page report, organized around the PRECEDE-PROCEED model of program planning. (Green, L and M Kreuter. HEALTH PROMOTION PLANNING: An Educational and Ecological Approach, Third Edition, 1999)
- 8. Develop list of priority areas (up to 20) from which OESI program planning will evolve.
- 9. Send global priorities draft to send to stakeholders (list supplied by OESI).
- 10. Incorporate comments and develop final list of 10 priorities.
- 11. Identify and implement appropriate venues for reporting information to OESI staff (i.e. ½ day meeting, conference calls presentations, etc.)
- 12. Submit final report (30 page document and list of priorities).
- 13. Develop power point slides summarizing process.

Specific Deliverables:

- 1. Report outline
- 2. HHS/NIH/NCI trends analysis related to cancer education no more than 15 pages
- 3. Environmental scan related to cancer-education funded grants, literature, and national programs and synthesize data no more than 15 pages
- 4. Trends analysis related to national model education programs no more than 15 pages
- 5. Trends analysis on cancer morbidity, mortality, and public need– no more than 15 pages
- 6. Summary of all data in a 30 page report, based on the PRECEDE-PROCEED model
- 7. Develop list of annotated global priorities (up to 20) from which OESI program planning will evolve
- 8. Develop power point slides summarizing process (not to exceed 20 slides)

Timeline:

September 2003 Contract awarded

October 1, 2003 Outline and timeline completed

October-November 2003 Data Collected

December 1, 2003 First Draft Report (and global priorities) submitted
January 5, 2004 Second Draft Report (and global priorities) submitted
Third Draft Report (and global priorities) submitted

February 2. 2004 Send global priorities draft to send to stakeholders (list supplied by

OESI)

March 2004 Consolidate and incorporate comments

April 30, 2004 Final Report Submitted

Qualifications

The research expert must have the following minimum qualifications:

- A Masters Degree or PhD in health education, health policy, or related discipline
- Three years conducting needs assessments, integrating qualitative and quantitative data, at the national or regional levels
- Three years experience in program planning, preferably using **PRECEDE-PROCEED**
- Three years experience conducting literature searches (via pub med and similar databases) and performing literature reviews
- Familiarity with cancer morbidity and mortality data
- Familiarity with government agencies, especially NIH Institutes
- Extensive experience with qualitative research, including telephone and in person interviews.
- Proven ability to provide written communication
- Proven ability to orally communicate research findings successfully to a variety of audiences
- Knowledge of Microsoft suite

G. EVALUATION FACTORS

1. Technical Proposal

The Offeror should submit sufficient information with the technical proposal to demonstrate how they will accomplish the tasks in the Statement of Work.

2. Proposed Personnel and Quality of Work

Please propose a primary person and an individual to provide backup support. Submit resumes for each (not included in page limit). The Offeror's proposal will be evaluated for experience, education, training, and availability and role in performing task work. OESI is particular interested in staff with expertise in health education, health policy, or related discipline, and those who have conducted needs assessments integrating quantitative and qualitative information. Proposals are sought that demonstrate creativity and innovation in responding to this challenge.

3. Price

ATTACHMENT 1 (CONTRACTOR RESPONSIBILITY SHADED)

SETTING PRIORITIES OFFICE WIDE Process-every two years

By May 31 2004, and every 2 years thereafter (2006, 2008), OESI will examine various data/information sources to answer specific questions related to cancer education (listed on the pages that follow). This process will generate up to 10 global priorities from which OESI will evolve.

OESI will seek feedback from internal and external constituencies.

FOCUS: Phase 1-3

- (1) *social* diagnosis of the self-determined needs, wants, resources, and barriers of the intended audience:
- (2) *epidemiological* diagnosis of the problem(s); (3) *behavioral and environmental* diagnosis of the specific behaviors and environmental factors which educational programs seek to address

PROGRAM PLANNING

Process-yearly

By July 31 2004, and each year thereafter, OESI will

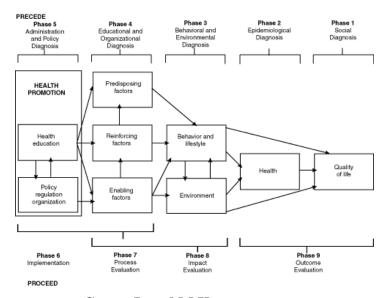
- 1. Distill priorities related to education from the Bypass budget and make minor modifications to the 2-year OESI priorities document.
- 2. Determine what programs OESI will develop based on one or more of the global priorities
- 3. Each priority will be addressed by a specific project plan

OESI will seek feedback from external constituencies.

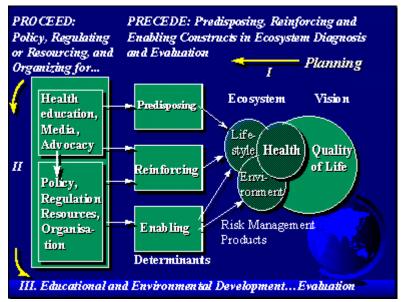
FOCUS: Phase 4-5

- (4) *educational and organizational* diagnosis of the predisposing, enabling, and reinforcing conditions which immediately affect behaviors;
- (5) *administrative and policy* diagnosis of the resources needed and available in the Office, as well as the barriers and supports available in the NCI and through its partners.

PRECEDE-PROCEED* (A guiding framework)



• Source: **Green, L and M Kreuter. HEALTH PROMOTION PLANNING**: An Educational and Ecological Approach, 1991.



Source: **Green, L and M Kreuter. HEALTH PROMOTION PLANNING**: An Educational and Ecological Approach, Third Edition, 1999

Establishing OESI Priorities: Questions for Data Sources

Report on these questions from the sources listed above will generate up to 10 global issues that will be the focus for Office wide priorities.

Phase 1-3

- (1) *social* diagnosis of the self-determined needs, wants, resources, and barriers in the target communities; (2) *epidemiological* diagnosis of the problem(s);
- (3) behavioral and environmental diagnosis of the specific behaviors and environmental factors for the program to address:
 - *Demographics:* Which priorities best showcase the mission of OESI (including addressing diverse and low-literate populations)? What is the potential impact of the program/project on public health? Will it serve an underserved population?
 - *Environmental:* What education priorities are other cancer organizations or groups pursuing? Do the priorities of these groups complement OESI's mission or goals? Are there gaps/unmet needs in cancer education and information that OESI might be well fitted to address? What are areas of national concern that should be considered (palliative care, adult literacy, underserved, etc.)?
 - Public Need: What are stakeholder (patients/ partners/ advocates) cancer priorities? What is the feedback from CIS/ HINTS? What are the trends in cancer education as evidenced by conferences and literature? What are the top trends in morbidity and mortality for men, women, and ethnic minorities?
 - *Tradition/ Precedence:* Which data sources have contributed to setting office priorities in the past? Would the program/project contribute to existing NCI content? Does it duplicate any content?

Phase 4-5

- (4) educational and organizational diagnosis of the predisposing, enabling, and reinforcing conditions which immediately affect behavior;
- (5) administrative and policy diagnosis of the resources needed and available in the Office, as well as the barriers and supports available in the NCI and through its partners
- Institutional climate: What are the current cancer priorities as evidenced by the NCI Bypass Budget, Progress Review Groups, and Extraordinary Opportunities? Are there program priorities for other division or groups within NCI that parallel or complement those of OESI? What are key funding initiatives concentrating on—such as
 - o RFAs, RFPs, PAs
 - o CTEP/cooperative Groups
 - o SBBR/STTR
- o *Government-wide Priorities*: What government-wide initiatives have specific roles for educational efforts related to cancer? What priorities have been set by NIH and HHS?
- O Partnership Opportunities: What priorities lend themselves to partnership opportunities where the synergistic effect of partners' contribution might enhance the impact of programs? Do strategic partners surrounding cancer education program and tools exist that might serve to enhance the content, broaden [or target] the reach of specific programs?
- o *Technology:* What priorities can be implemented with the current technology profile? Are there ways where the delivery of information or education can be enhanced by technology?

Task Order # NICS-152		
TITLE: NCI Education	n Strategic Planning	
PART II - CONTRACTOR'S Contractor:	S REPLY: CONTRACT #263-01-D-0	
Points of Contact:		
Phone-	Fax-	
Address:	- 	
TOTAL ESTIMATED COST:	Pricing Method	
TOTAL ESTIMATED NUMB PROPOSED COMPLETION I		
FOR THE CONTRACTOR:		
Signa	ature Date	
SOURCE SELECTION:		
BEST OVERALL PROPOSAL AND	MITTED PROPOSALS HAVE DETERMINED THIS O THE PRICE/COST IS REASONABLE.	FIRM SUBMITTED THE
Appropriations Data:		
(ATTACH OBLIGATING DOCUMENT		
RECOMMENDED:		
FAX#	Signature - Project Officer	Date
APPROVED:		
FAX #	Signature - Contracting Officer	Date
NIH APPROVAL -		
	O THE ESTIMATED LABOR HOURS OR ESTIMATED T L OF THE CONTRACTING OFFICER & PICS COORDIN	
APPROVED:Signature -Anthony M. Revenis, J.D.	., NIH-PICS Coordinator Date	